POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	9.4.		4/5/00
O.I.P.E. CLASSIFIER			5 4-14-00
FORMALITY REVIEW	LH	60105	5-30-0
RESPONSE FORMALITY REVIEW	LH	60105	7-27-0

INDEX OF CLAIMS

✓	.... Rejected	N	.... Non-elected
=	.... Allowed	I	.... Interference
—	(Through numeral)... Canceled	A	.... Appeal
÷	.... Restricted	O	.... Objected

Final	Original	10/07	4/23/03	11/17/03	5-12-04						
	1		✓	✓	✓						
	2		✓	✓	✓						
	3		✓	✓	✓						
	4	✓	✓	✓							
	5	✓	✓	✓							
	6	✓	✓	✓							
	7	✓	✓	✓							
	8	✓	✓	✓							
	9	✓	✓	✓							
	10	✓	✓	✓							
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	14	✓	✓	✓							
	15	✓	✓	✓							
	16	✓	✓	✓	✓						
	17	✓	✓	✓							
	18	N									
	19	✓	✓	✓							
	20	N	✓	✓	✓						
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	22	✓	✓	✓							
	23	✓	✓	✓							
	24	N									
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If more than 150 claims or 10 actions
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